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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**APPLICANT(S): LEWKOWICZ,  
Shlomo et al.**

**EXAMINER: Not Yet Known**

**SERIAL NO.: 10/536,982**

**GROUP ART UNIT: 3737**

**FILED: May 31, 2005**

**ATTORNEY DOCKET No.: P-4433-US**

**FOR: METHODS, DEVICE, AND SYSTEM FOR IN VIVO DIAGNOSIS**

Mail Stop Missing Parts  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR CORRECTED FILING RECEIPT**

Sir:

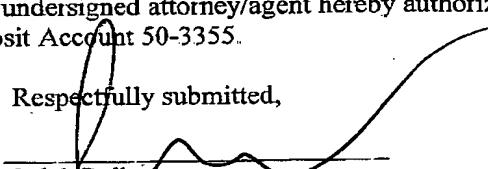
Attached is a copy of the official filing receipt received from the U.S. Patent and Trademark Office in connection with the above-identified Application for which issuance of a corrected filing receipt is respectfully requested.

There is a typographical error in the address of inventor Gavriel Meron.  
The address should read Petach Tikva.

The correction or the error is not due to an error by Applicant(s) and no fee is due

If any additional fee is required, the undersigned attorney/agent hereby authorizes the Patent Office to charge such additional fee to Deposit Account 50-3355.

Respectfully submitted,

  
Caleb Pollack  
Attorney/Agent for Applicant(s)  
Registration No. 37,912

Dated: November 1, 2005

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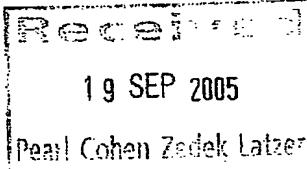


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APPL. NO	FILING OR 371 (c) DATE	ART UNIT	FIL FEE RECD	ATTY DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/536,982	05/31/2005	3737	600	P-4433-US	4	14	3

49443  
PEARL COHEN ZEDEK, LLP  
10 ROCKEFELLER PLAZA  
SUITE 1001  
NEW YORK, NY 10020



CONFIRMATION NO. 6340

## FILING RECEIPT

\*OC000000016973277\*

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Date Mailed: 09/13/2005

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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TIVKA

Power of Attorney: The patent practitioners associated with Customer Number 49443

## Domestic Priority data as claimed by applicant

This application is a 371 of PCT/IL03/01015 11/30/2003

## Foreign Applications

UNITED STATES OF AMERICA 60429564 11/29/2002

Projected Publication Date: 12/15/2005

Non-Publication Request: No

Early Publication Request: No

## Title

Methods, device and system for in vivo diagnosis

Preliminary Class  
600

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